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ATTORNEYS FOR PLAINTIFFS

**IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA**

Frank Foster, Phillip Wamock,
individually, on behalf of all others
similarly situated, and on behalf of the
general public,

Plaintiffs,

vs.

Nationwide Mutual Insurance Company,
Defendant.

Case No: 3:07-cv-04928-SI

NOTICE OF CONSENT FILING

PLEASE TAKE NOTICE, that pursuant to 29 U.S.C. § 216, Plaintiffs hereby file the
attached Consent Form(s) for the following person(s):

Shaw Deborah

1 Dated: November 16, 2007

s/ Matthew Helland

2 **NICHOLS KASTER & ANDERSON, LLP**
3 Matthew C. Helland, CA State Bar No. 250451
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21 ATTORNEYS FOR PLAINTIFFS
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CERTIFICATE OF SERVICE

Foster et al v. Nationwide Mutual Insurance Company
Case No.3:07-cv-04928-SI

I hereby certify that on November 16, 2007, I caused the following document(s):

Notice of Consent Filing

to be served via ECF to the following:

Andrew J. Voss
Littler Mendelson, P.C.
80 South Eighth Street
1300 IDS Center
Minneapolis, MN 55402

Dated: November 16, 2007

s/Matthew Helland

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1 **CONSENT FORM AND DECLARATION**

2 I hereby consent to join a lawsuit against Nationwide Insurance as a Plaintiff to assert
 3 claims against it for violations of the wage and hour laws of the United States and/or the state(s)
 4 where I worked for Nationwide Insurance. During the past three years, there were occasions when
 5 I worked over 40 hours per week for Nationwide Insurance and did not receive overtime
 6 compensation. I worked for Nationwide Insurance as a (please check all that apply):

- 7 ☐ Special Investigator
 8 ☐ Senior Special Investigator
 9 ☐ Special Investigator I
 10 ☒ Special Investigator II
 11 ☐ Special Investigator III

12 Approximate Dates of Employment 7/01 to 3/07

13 Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and
 14 correct.

15 Deborah A. Shaw 11/13/07
 16 Signature Date

17 Deborah A. Shaw
 18 Print Name

19 REDACTED

20 **Fax or Mail To:**

21 **Paul Lukas**
 22 **Nichols Kaster & Anderson, PLLC**
 23 **4600 IDS Center, 80 S. 8th Street**
 24 **Minneapolis, MN 55402**
 25 **FAX (612) 215-6870**

26
27
28 **CONSENT AND DECLARATION**